PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

			or <u>Fax</u>	•			
appropriate. All further con indicated unless corrected	respondence including the I below or directed otherwise	latant advance are	dare and notifical	ion of maintenance tees v	ired). Blocks I through 5 s will be mailed to the current and/or (b) indicating a sepa	correspondence address as	
maintenance fee notification	E ADDRESS (Note: Use Block I for	any change of aguress)	7. L. C.	Note: A certificate of	mailing can only be used for	or domestic mailings of the	
	590 01/11/2005	APR	0 4 2005 t	Fee(s) Transmittal. The papers. Each additional have its own certificate	his certificate cannot be used al paper, such as an assignme e of mailing or transmission.	for any other accompanying	
TRASK BRITT P.O. BOX 2550 SALT LAKE CITY, UT 84110			RADENBOUND	I hereby certify that the States Postal Service	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.		
04/05/2005 HVUONG2 00000058 09944508					Leta M. Howard (Depositor's name)		
)1 FC:1504 300.00 QP				Leta M.	Leta M. Howard (Signature		
2 FC:1501 1400.00 DP 3 FC:8001 15.00 DP				March 31	March 31, 2005		
APPLICATION NO.	FILING DATE	FIRST NAMED INVE		VENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/944,508	08/30/2001	Warren M. Farnwo		nworth	3393.6US (97-324.6)	4342	
	ONTINUOUS MODE SOLI	,		DD (as amended	TOTAL FEE(S) DUE	DATE DUE	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE					
nonprovisional	ovisional NO \$1400			\$300	\$1700	04/11/2005	
EXAMINER		ART UNIT		CLASS-SUBCLASS]		
FULLER, ERIC B				427-472000	·		
 Change of correspondence address or indication of "Fee Address" (CFR 1.363). Change of correspondence address (or Change of Corresponder Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custon Number is required. 			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON T	HE PATENT (p	int or type)			
PLEASE NOTE: Unless recordation as set forth in	s an assignee is identified be n 37 CFR 3.11. Completion	elow, no assignee of this form is NO	data will appear Γ a substitute for	on the patent. If an assignment.	nee is identified below, the	document has been filed for	
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
MICRON TECHNOLOGY, INC. Boise, Idaho							
Please check the appropriate assignee category or categories (will not be printed on the patent):							
4a. The following fee(s) are enclosed: 4b. Payment of Fee(s):							
Issue Fee A check in the amount of the fee(s) is enclosed.							
_ ,				Payment by credit card. Form PTO-2038 is attached.			
Advance Order - # o	f Copies5		Deposit Accoun	t Number 20-1469	charge the required fee(s), or enclose an extra	copy of this form).	
a. Applicant claims S	s (from status indicated above MALL ENTITY status. See	37 CFR 1.27.			ALL ENTITY status. See 37 (
NOTE: The Issue Fee and I	is requested to apply the lss Publication Fee (if required) ords of the United States Pat	will not be accepted	d from anyone of	or to re-apply any previous ner than the applicant; a reg	sly paid issue fee to the applic gistered attorney or agent; or	ation identified above. the assignee or other party in	
Authorized Signature	Lames R.	Dung	a	DateM	arch 31, 2005		
Typed or printed name James R. Duzan		an /		Registration	n No. <u>28,393</u>		
This collection of informati an application. Confidentia submitting the completed a	on is required by 37 CFR 1.3 lity is governed by 35 U.S.C pplication form to the USPT	11. The information . 122 and 37 CFR O. Time will vary	on is required to on its required to on its required to on its required to one of the control of	btain or retain a benefit by ion is estimated to take 12 the individual case. Any of	the public which is to file (ar minutes to complete, including comments on the amount of the Trademark Office IIS De	nd by the USPTO to process) ing gathering, preparing, and ime you require to complete	

this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.